

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	11-28-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	26	677/8	2-8-01

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	12	
2	✓	13	
3	✓	14	
4	✓	15	
5	✓	16	
6	✓	17	
7	✓	18	
8	✓	19	
9	✓	20	
10	✓	21	
11	✓	22	
12	✓	23	
13	✓	24	
14	✓	25	
15	✓	26	
16	✓	27	
17	✓	28	
18	✓	29	
19	✓	30	
20	✓	31	
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28	✓	39	
29	✓	40	
30	✓	41	
31	✓	42	
32	✓	43	
33	✓	44	
34	✓	45	
35	✓	46	
36	✓	47	
37	✓	48	
38	✓	49	
39	✓	50	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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